PTO/SB/06 (08-00)

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PRIENT APPLICATION FEE DETERMINATION RECORD 2551.032 OTHER THAN SEP 2 5 2001 **CLAIMS AS FILED - PART I** SMALL ENTITY OR **SMALL ENTITY** (Column 2) (Column 1) NUMBER FILED **NUMBER EXTRA RATE** FEE **RATE** FEE MADEM \$ 0 \$ 0 OR (37 CFR 1.16(a)) TOTAL CLAIMS minus 20 = x \$_18 0 OR 0 INDEPENDENT CLAIMS minus 3 = <u>40</u> = 80 0 OR 0 (37 CFR 1.16(b)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) 0 135 = 0 0 270 OR 0 **TOTAL** OR TOTAL # If the difference in column 1 is less then zero, enter "0" in column 2 OTHER THAN ECEIVED CLAIMS AS AMENDED - PART II SMALL ENTITY OR SMALL ENTITY (Column 3) (Column 1) (Column 2) £ 7 2001 CLAIMS HIGHEST ADDI-ADDI-REMAINING **NUMBER** PRESENT **RATE** TIONAL RATE Technology Center 2100 **AMENDMENT** AFTER PREVIOUSLY **EXTRA** FEE FEE AMENDMENT PAID FOR OR Total ** 20 \$_18 \$ 9 0 Minus 0 0 (37 CFR 1.16(c)) OR Independent 40 80 Minus 0 0 0 (37 CFR 1.16(b)) OR 135 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) 0 0 270 _ OR TOTAL TOTAL. OR 0 ADDIT. FEE ADDIT. FEE (Column I) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT **RATE** TIONAL TIONAL RATE **AMENDMENT AFTER** PREVIOUSLY **EXTRA** FEE FEE AMENDMENT PAID FOR OR Total (37 CFR 1.16(c)) x \$_18 _{\$} 9 Minus 0 0 OR Independent 40 80 0 0 Minus (37 CFR 1.16(b)) OR 135 0 270 O FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL 0 OR 0 ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT RATE** TIONAL RATE TIONAL **AMENDMENT** AFTER **PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR x \$_9 c \$_18 Total ** 20 0 0 Minus = 0 20 (37 CFR 1.16(c)) OR Independent 80 40 0 0 = 0 5 Minus OR 135 270 0 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) 0 OR TOTAL TOTAL 0 0 OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ADDIT. FEE ADDIT, FEE ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".